

Commonwealth of Virginia
Department of Professional and Occupational Regulation
Post Office Box 29570
Richmond, Virginia 23242-0570
(804) 367-8595



Board for Asbestos, Lead, and Home Inspectors
ASBESTOS ANALYTICAL LABORATORY LICENSE APPLICATION
Fee \$40.00

**A check or money order payable to the TREASURER OF VIRGINIA, or
a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.**

Applications must be signed by the laboratory's officer or an individual designated as a responsible party.

1. Laboratory Name _____
2. Federal Employer Identification Number

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3. Street Address (PO Box not accepted) _____
City, State, Zip Code _____
4. E-mail Address _____
5. Telephone & Facsimile Numbers

()	–
Telephone	

()	–
Facsimile	

()	–
Beeper/Cellular	
6. Branch facilities' addresses and telephone numbers (please list **all** laboratory sites)

No.	Address	Telephone Number
1		() –
2		() –
3		() –
4		() –

7. Type of analyses to be performed by the laboratory (check **all** that apply)
 - Bulk Materials analysis using Polarized Light Microscopy (PLM) ♦ ☐
 - Airborne Asbestos Fibers analysis using Phase Contrast Microscopy (PCM) * ☐
 - Airborne Asbestos Fibers analysis using Transmission Electron Microscopy (TEM) ♦ ☐

♦ To be licensed in this type of asbestos analysis, a copy of the laboratory's National Voluntary Laboratory Accreditation Program (NVLAP) Certificate of Accreditation and Scope of Accreditation must be submitted with this completed application.

* To be licensed in this type of asbestos analysis, evidence of the laboratory's proficiency as determined by the National Institute for Occupational Safety and Health (NIOSH) Proficiency Analytical Testing (PAT) **or** accreditation from the American Industrial Hygiene Association for Asbestos Analytical Services or the applicant shall provide evidence that each analyst is listed **or** has applied for listing in the Asbestos Analyst Registry (AAR) and has a performance rating of "acceptable" for the most recent Asbestos Analyst Testing (AAT) round, **and** proof that all analysts have successfully completed the NIOSH 582 Course (or equivalent) must be submitted with this completed application.

OFFICE USE ONLY	DATE	FEE	CLASS OF FEE	LICENSE NUMBER 3 3 3 3	ISSUE DATE
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8. Enter the name and title of your company management (individuals having controlling interest), i.e., the sole proprietor of a sole proprietorship, the partners of a general partnership, the managing partner of a limited partnership, the officers and/or directors of an association, the managers of a limited liability company, or the officers of a corporation.

First Name	MI	Last Name	Gen	Date of Birth	Social Security Number *	Title
					- -	
					- -	
					- -	

9. Do you hold a current or expired environmental remediation license issued by the Virginia Board for Asbestos, Lead and Home Inspectors?

No ☐

Yes ☐ If yes, please enter the Virginia license number(s) and expiration date(s) below.

Asbestos License Number	Expiration Date	Lead License Number	Expiration Date

10. Has your laboratory or any of its branch facilities ever been subject to a disciplinary action imposed by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, list the name of the jurisdiction in which the disciplinary action took place, the license number and the name of the laboratory or facility involved in the disciplinary action. Provide an explanation of events, including a description of the disciplinary proceeding and the type of sanctions that were imposed (i.e., suspension, revocation, voluntary surrender of license, monetary penalty, fine, reprimand, termination of asbestos abatement or inspection activities prior to project completion, etc.). Attach copies of any correspondence or documentation (including a copy of the final order, decree or case decision) related to this matter. If necessary, you may attach a separate sheet of paper.

11. A. Has your laboratory or any individual having a controlling interest in the laboratory ever been convicted in any jurisdiction of **any felony**? *Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.*

No ☐ Yes ☐ If yes, please provide the information requested in #11.C.

- B. Has your laboratory or any individual having a controlling interest in the laboratory ever been convicted in any jurisdiction of **any misdemeanor**? *Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.*

No ☐ Yes ☐ If yes, please provide the information requested in #11.C.

- C. If you answered "yes" to either question #11.A. or #11.B., list the name of the laboratory and/or individual(s) and the felony and/or misdemeanor conviction(s). Attach a copy of all applicable criminal conviction, state police and court records; information on the current status of incarceration, parole, probation, etc.; and any other information you wish to have considered with this application (i.e., reference letters, documentation of rehabilitation, etc.). If necessary, you may attach a separate sheet of paper.

12. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I verify that during the past three years, there were no suspensions or revocations of any of the laboratory's authorizations held to perform asbestos-related work, nor are there any pending enforcement actions involving any of the laboratory's asbestos licenses. I certify that the Department will be notified if the laboratory management is subject to any disciplinary action or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to receiving the requested license. I also certify that the laboratory management and analysts understand, and have complied with, all the laws of Virginia related to licensure and environmental remediation under the provisions of Title 54.1, Chapters 1, 2, 3, and 5 of the *Code of Virginia* and the *Virginia Asbestos Licensing Regulations*.

Printed Name _____

Title _____ Date _____

Signature _____

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.



All applicants are required to have all the occupational or professional licenses and certifications necessary and required by state statute or local ordinance to transact the business of an asbestos analytical laboratory in addition to the requirements set forth in the *Virginia Asbestos Licensing Regulations*.